NEW YORK WING, CIVIL AIR PATROL VEHICLE REPAIR REOUEST										
Vehicle ID				Location		Date				
Name & Posit	ion of Contact		Day Time	Phone	Night Time Phone	E-Mail Addr	ess			
Brief Descrip	tion of Problem:									
Brief Description repair requested:										
Date of last oi	l change			Mile	age at last oil change					
 INSTRUCTIONS Attach one estimate from a New York State license repair shop, preferably a national chain. Forward the estimate with this form to NYW -LGT. No repair may be done prior to authorization. Repairs done without authorization will NOT BE reimbursed. All repairs must be completed within 20 days after authorization. The original receipt must be sent to NYW -LGT and a copy placed in the vehicle log-binder. Groups are responsible for payment to the repair shop. New York Wing Hq. will reimburse the group after receiving reimbursement from CAP National HQ. Groups that do not follow this procedure may not be reimbursed. Groups are responsible for routine repairs. Groups must be able to show that vehicle has been properly maintained. Groups will be responsible for all repairs that results from misuse or neglected of vehicle. Group Commander's or Designee Signature Group Commander's or Designee Name, Grade, Title 										
			FOR WI	NG USE	ONLY					
Date requeste Action Taken	d received at wing :									
Date requeste	d was forward to LO'	s office								
Date of National's approval					Control Number					
Date authoriz										
Date original receipt was received at NYW-HQ Date original receipt was mailed to NHQ-LGT										
	was received from na									
Date payment was sent to the group					Check Number					
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NYWF 078 19 Feb 02